

PUBLIC VOUCHER FOR PURCHASES
SERVICES OTHER THAN PERSONAL

D. O. Vou. No. _____
Bu. Vou. No. 2071

U. S. COST REIMBURSABLE

(Department, bureau, or establishment)

Voucher prepared at _____

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. _____

To _____
(Payee)

PAID BY
Encl # 6
SAPC 26419
COPY 1 OF 2

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Cost				8,963	07

PAYMENT:

Complete ☐
Partial ☐
Final ☐

Use continuation sheet(s) if necessary

Shipped from _____ to _____ Weight _____ Government B/L No. _____ Total 8,963.07

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

STATINTL (Sign original only)

Differences _____

Date 4/4/58 *Payee

(Not required when a like certificate is made by payee on attached bill or bills)

Amount verified; correct for
(Signature or initials) EE

8,963.07

Per _____ Title _____
Contract No. A-101 Date _____ Req. No. _____ Date _____ Invoice Rec'd. _____

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$ _____

† _____
(Authorized Certifying Officer)

By _____

SIGN
ORIGINAL
ONLY

Title _____

Title _____

Date _____

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. _____ dated _____, 19____ for \$ _____ (on Treasurer of the United States in favor of payee named above.)
Cash, \$ _____, on _____, 19____ Payee _____
(Sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporation must appear in the space provided for the signature of the certifying officer. If the company or corporation is a partnership, the name of the partner must appear, as the case may be.
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Title _____

Public Voucher for Purchase and
Services Other Than Personal

MEMORANDUM

CONTINUATION SHEET

U. S. COST REIMBURSABLE

Sheet No. 1 of Bureau Voucher No. 2071

(Department, bureau, or establishment)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Contract <u>A-101</u> Costs applicable to ALL Systems					
		Direct Costs Properly Chargeable to Contract <u>A-101</u> for the period 3/24 thru 3/30/58					
		STATINTL					
		Research & Development					
				Production			
						Total	
		Labor for Week Ending March 30, 1958 Adjustment to Voucher #2045					
		STATINTL STATINTL					
		Overhead for Communications Division computed at interim rates as follows: Research & Development - [REDACTED] Production - [REDACTED]					
		Other Costs - Per schedule attached					
		Total Labor, Overhead and Other Costs					
		G & A expense computed at interim rate of [REDACTED]					
		Total Costs					
		STATINTL					
						\$ 8,963.07	

Sheet 1

3/31/58

DATE

WEEKLY DET DISTR

ACCOUNTS PAYABLE

THE RAMO-WOOLDRIDGE CORPORATION

FORM STL - 660

BATCH			INVOICE NUMBER	PURCHASE ORDER	CHECK NUMBER	PAYMENT DATE		Vendor Number	GROSS AMOUNT	DISCOUNT	EXP CLASS	EXP ELEMENT	CODE	COST CENTER			CHARGE DISTRIBUTION			NET AMOUNT	
No.	Mo.	Day				Mo.	Day							Maj.	Int.	Sub.	Account	M.I.O.	S.D.		Work Order
40	03	31	8	17		04	01	352					50	25	40	00	12501	5032	11	2	1075 * 1075 * 1075 **
Continued																					

Approved For Release 2000/04/11 : CIA-RDP64-00360R000600010102-2

Approved For Release 2000/04/11 : CIA-RDP64-00360R000600010102-2

Sheet #2

THE RAMO-WOOLDRIDGE CORPORATION
FORM STL - 680

ACCOUNTS PAYABLE

WEEKLY DET DISTR

3/31/58

DATE

BATCH			INVOICE NUMBER	PURCHASE ORDER	CHECK NUMBER	PAYMENT DATE		Vendor Number	GROSS AMOUNT	DISCOUNT	Eligible for Discount	C.O.D. if Eligible	COST CENTER			CHARGE DISTRIBUTION			NET AMOUNT	
No.	Mo.	Day				Yr.	Mo.						Day	Maj.	Int.	Sub.	Account	M.J.O.		S.D.
30	03	25	8	40524	44446		04	10	264			50	25	40	00	12501	5032	83	1	270
30	03	25	8	42655	44446		04	10	264			50	25	40	00	12501	5032	83	1	3395
30	03	25	8	DM-1540	44446		04	10	264			50	25	40	00	12501	5032	83	1	270-
35	03	27	8	196982	44452		04	10	290			50	25	40	00	12501	5032	83	1	2800
																				6195 *
																				6195 **
																				7270 ***
Continued																				

Approved For Release 2000/04/11 : CIA-RDP64-00360R000600010102-2

Approved For Release 2000/04/11 : CIA-RDP64-00360R000600010102-2

THE RAMO-WOOLDRIDGE CORPORATION

FORM STL - 680

ACCOUNTS PAYABLE

WEEKLY DET DISTR

DATE

3/31/58

Approved For Release 2000/04/11 : CIA-RDP64-00360R000600010102-2

BATCH			INVOICE NUMBER	PURCHASE ORDER	CHECK NUMBER	PAYMENT DATE		Vendor Number	GROSS AMOUNT	DISCOUNT	Tax Class	Cost Element	Code	COST CENTER			CHARGE DISTRIBUTION			NET AMOUNT
No.	Mo.	Day				Mo.	Day							Maj.	Int.	Sub.	Account	M.J.O.	S.D.	
39	03	31	8	1253	44404		04 04	233					50	25	40	00	12501	5093 07 3	1250 * 1250 * 1250 **	
<i>Continued</i>																				

Approved For Release 2000/04/11 : CIA-RDP64-00360R000600010102-2

6 | 5 | 4 | 3 | 2